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44702 7590 04/06/2005

**OSTRAGER CHONG FLAHERTY & BROITMAN PC  
250 PARK AVENUE, SUITE 825  
NEW YORK, NY 10177**

06/28/2005 SMINASS2 00000053 10602783

01 FC:1501 1400.00 OP  
02 FC:1504 300.00 OP

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

Dennis M. Flaherty	(Depositor's name)
<i>Dennis Flaherty</i>	(Signature)
June 23, 2005	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/602,783	06/24/2003	Basil C. Linton	ITW-14011	1675

TITLE OF INVENTION: RECLOSABLE BAG HAVING WICKET FLAP AND SLIDER-ACTUATED STRING ZIPPER

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	07/06/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
KIM, EUGENE LEE	3721	493-212000

<p>1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</p> <p><input checked="" type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</p> <p><input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</p>	<p>2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.</p>
<p>1 <u>Ostrager Chong</u> 2 <u>Flaherty &amp; Broitman</u> 3 <u>P. C.</u></p>	

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Illinois Tool Works Inc.

Glenview, Illinois

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

4a. The following fee(s) are enclosed:

Issue Fee  
 Publication Fee (No small entity discount permitted)  
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A check in the amount of the fee(s) is enclosed.  
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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  
 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature \_\_\_\_\_

Date June 23, 2005

Typed or printed name \_\_\_\_\_

Registration No. 31,159

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